

<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Effective January 1, 2003				Application or Docket Number  <b>116899</b>		
<b>CLAIMS AS FILED - PART I</b> (Column 1) (Column 2)				<b>SMALL ENTITY</b> <b>TYPE</b> <input type="checkbox"/> <b>OTHER THAN</b> <b>OR</b> <b>SMALL ENTITY</b>		
<b>TOTAL CLAIMS</b> <b>24</b>		<b>FOR</b> <b>NUMBER FILED</b> <b>NUMBER EXTRA</b>		<b>RATE</b> <b>FEES</b> <b>BASIC FEE</b> <b>375.00</b> <b>OR</b> <b>BASIC FEE</b> <b>750.00</b>		
<b>TOTAL CHARGEABLE CLAIMS</b> <b>24</b> minus 20= <b>* 4</b>		<b>INDEPENDENT CLAIMS</b> <b>1</b> minus 3 = <b>* 1</b>		<b>X\$ 9=</b> <b>X42=</b> <b>+140=</b> <b>TOTAL</b> <b>OR</b> <b>TOTAL</b> <b>822</b>		
<b>MULTIPLE DEPENDENT CLAIM PRESENT</b> <input type="checkbox"/>				<b>X\$18=</b> <b>72</b> <b>X84=</b> <b>+280=</b>		
* If the difference in column 1 is less than zero, enter "0" in column 2						
<b>CLAIMS AS AMENDED - PART II</b> (Column 1) (Column 2) (Column 3)				<b>SMALL ENTITY</b> <b>OTHER THAN</b> <b>OR</b> <b>SMALL ENTITY</b>		
<b>AMENDMENT A</b>	<b>CLAIMS REMAINING AFTER AMENDMENT</b>		<b>HIGHEST NUMBER PREVIOUSLY PAID FOR</b> <b>PRESENT EXTRA</b>		<b>RATE</b> <b>ADDITIONAL FEE</b> <b>X\$ 9=</b> <b>X42=</b> <b>+140=</b> <b>TOTAL</b> <b>OR</b> <b>ADDITIONAL FEE</b>	
	Total <b>*</b>	Minus <b>**</b>	<b>=</b>	<b>*</b>	<b>**</b>	<b>=</b>
<b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> <input type="checkbox"/>						
<b>AMENDMENT B</b>	<b>CLAIMS REMAINING AFTER AMENDMENT</b>		<b>HIGHEST NUMBER PREVIOUSLY PAID FOR</b> <b>PRESENT EXTRA</b>		<b>RATE</b> <b>ADDITIONAL FEE</b> <b>X\$ 9=</b> <b>X42=</b> <b>+140=</b> <b>TOTAL</b> <b>OR</b> <b>ADDITIONAL FEE</b>	
	Total <b>*</b>	Minus <b>**</b>	<b>=</b>	<b>*</b>	<b>**</b>	<b>=</b>
<b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> <input type="checkbox"/>						
<b>AMENDMENT C</b>	<b>CLAIMS REMAINING AFTER AMENDMENT</b>		<b>HIGHEST NUMBER PREVIOUSLY PAID FOR</b> <b>PRESENT EXTRA</b>		<b>RATE</b> <b>ADDITIONAL FEE</b> <b>X\$ 9=</b> <b>X42=</b> <b>+140=</b> <b>TOTAL</b> <b>OR</b> <b>ADDITIONAL FEE</b>	
	Total <b>*</b>	Minus <b>**</b>	<b>=</b>	<b>*</b>	<b>**</b>	<b>=</b>
<b>FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM</b> <input type="checkbox"/>						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.						